PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
Effective October 1, 2001 8304 M													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENTITY OTHER THA					
TOTAL CLAIMS			19					RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		* —			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			∑ minus 3 =		* _			X42=		OR	X84=		
MUI	LTIPLE DEPEN	DENT CLAIM PR	RESENT						 	1	+280=	2000	
* If the difference in column 1 is less than zero, enter "0" in column 2							'	+140=	-	OR	TOTAL	280	
								TOTAL		OR	OTHER	<u> /0之〇・</u> THAN	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DMI	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=]	
AMENDMENT	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+140=		OR	+280=		
							ļ	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE	<u> </u>	70,,	ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	\	
AMENDME	Independent	*	Minus	***		=		X42=		OR	V04		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		1		1	
									L	OR	TOTAL	-	
(O.1								ADDIT. FE		OR	ADDIT. FEE	=L	
ြ		(Column 1) CLAIMS REMAINING		HIG NUI	umn 2) GHEST IMBER VIOUSLY	PRESENT		RATE	ADDI- TIONAL]	RATE	ADDI- TIONAL	
ĒN		AFTER AMENDMENT			D FOR	EXTRA	4		FEE	4		FEE	
Š	Total	*	Minus	**		=	4	X\$ 9=		OR	X\$18=	<u> </u>	
AMENDMENT C	Independent	*	Minus	PENDEN	VT CLAIS	= /	4	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		٦,,,	+280=		

ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 8/01)